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CONFIRMATION NO. 4020

SERIAL NUMBER	FILING or 371(c) DATE RULE	CLASS	GROUP ART UNIT	ATTORNEY DOCKET NO.
10/595,647		192	3655	VOI0258

APPLICANTS

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**** CONTINUING DATA *******

This application is a 371 of PCT/EP04/12700 11/10/2004

**** FOREIGN APPLICATIONS *******

GERMANY 103 53 554.3 11/14/2003

**** IF REQUIRED, FOREIGN FILING LICENSE GRANTED ****

02/20/2008

Foreign Priority claimed	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	STATE OR COUNTRY	SHEETS DRAWINGS	TOTAL CLAIMS	INDEPENDENT CLAIMS
35 USC 119(a-d) conditions met	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Met after Allowance			
Verified and Acknowledged	/EDWIN YOUNG/ Examiner's Signature	Initials	GERMANY	5	20

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TITLE

Starting Unit

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